Case 24-15533-RG Doc 16 Filed 07/29/24 Entered 07/29/24 11:57:06 Desc Main Document Page 1 of 7

Fill in this information to identify your case:							
Debtor 1	Jose A Galvao						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY					
Case number	24-15533						
(if known)							

■ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	300,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	6,400.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	306,400.00
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	418,881.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	123,625.00
	Your total liabilities	\$	542,506.00
Par	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	9,532.16
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	8,598.68
⊃ar	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other sc	hedules.
7.	■ Yes What kind of debt do you have?		
1.	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	personal	, family, or

the court with your other schedules.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

Case 24-15533-RG Doc 16 Filed 07/29/24 Entered 07/29/24 11:57:06 Desc Main Document Page 2 of 7

Debtor 1 Jose A Galvao Case number (if known) 24-15533

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form	١.
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$_

\$_____3,835.77

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tot	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Fill in this inform	nation to identify your case:	
Debtor 1	Jose A Galvao	
Debtor 2 (Spouse, if filing)		
United States B	ankruptcy Court for the: DISTRICT OF NEW JERSEY	
Case number (If known)	24-15533	Check if this is: An amended filing
		■ An amended ming □ A supplement showing postpetition chapter 13 income as of the following date:
Official F	orm 106I	MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Empleyment status	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation	Bartender	Restuarant Owner
	Include part-time, seasonal, or self-employed work.	Employer's name	Aldai Inc.	Churrascaria Paladar
	Occupation may include student or homemaker, if it applies.	Employer's address	2 US Route 46 Hackettstown, NJ 07840	2 US Route 46 Hackettstown, NJ 07840
		How long employed to	here?	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
 Estimate and list monthly overtime pay.

2. \$ 5,200.00 \$ 0.00
3. +\$ 0.00 +\$ 0.00
4. \$ 5,200.00 \$ 0.00

For Debtor 2 or

For Debtor 1

4. Calculate gross Income. Add line 2 + line 3.

Debt	or 1	Jose A Galvao	_	(Case	number (<i>if knov</i>	vn)	24-155	33		
					For	Debtor 1		For Do		2 or pouse	
	Cop	by line 4 here	4.		\$	5,200.0	00	\$		0.00)
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5	a.	\$	943.1	15	\$		0.00)
	5b.	Mandatory contributions for retirement plans	51		\$	0.0		\$		0.00	
	5c.	Voluntary contributions for retirement plans	50	c.	\$	0.0	00	\$		0.00)
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.0	00	\$		0.00)
	5e.	Insurance		e.	\$	0.0		\$		0.00	_
	5f.	Domestic support obligations	5f		\$	0.0		\$		0.00	
	5g.	Union dues	5(-	\$_	0.0		. \$		0.00	
	5h.	Other deductions. Specify:	_	h.+	\$_		00 -	+ \$		0.00	_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	943.1		\$		0.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	-	\$	4,256.8	35	\$		0.00	<u>) </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.		a.	\$	0.0		\$	5,	275.31	
	8b.	Interest and dividends	81	b.	\$_	0.0	00	\$		0.00	<u>) </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	C.	\$	0.0	10	\$		0.00	1
	8d.	Unemployment compensation	80		<u>\$</u> —	0.0		\$		0.00	_
	8e.	Social Security	86	e.	\$	0.0		\$		0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$	0.0		\$		0.00	_
	8g.	Pension or retirement income	80	g. h.+	\$_ \$	0.0		. •—		0.00	
	8h.	Other monthly income. Specify:	_ 01	n.+ 	Φ_	0.0	00 -	· • —		0.00	<u>,</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	0.0	00	\$	5	5,275.3	31
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		4,256.85 +	\$	5 27	5.31	= \$	9,532.16
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				1,200.00			J.J.	_	3,002.10
11.	Star Incli othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exify:	dep						hedule 11.		0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certaillies							12.	\$	9,532.16
13.	Do	you expect an increase or decrease within the year after you file this form	?							Combi	ined Ily income
		No.									

	in this informa	ation to identify yo	our case:					
Deb	otor 1	Jose A Galva	ao				k if this is: An amended filing	
Deb	otor 2					_	•	wing postpetition chapter
(Spo	ouse, if filing)				_		13 expenses as of	
Unit	ed States Bankı	ruptcy Court for the	: DISTRI	CT OF NEW JERSEY		-	MM / DD / YYYY	
	e number 24	4-15533						
(II K	nown)							
O	fficial Fo	rm 106J						
So	chedule	J: Your	Exper	ises				12/1
Be info	as complete ormation. If m	and accurate as	possible. eded, atta	If two married people a ch another sheet to this				
Par 1.	t 1: Desci	ribe Your House nt case?	hold					
	■ No. Go to	o line 2. es Debtor 2 live i	in a separa	ate household?				
	□N							
	ΠY	es. Debtor 2 mus	st file Offici	al Form 106J-2, <i>Expense</i>	s for Separate House	ehold of Debt	or 2.	
2.	Do you hav	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Son			■ Yes
								□ No □ Yes
								□ No
								Yes
								□ No □ Yes
3.	Do your exp	oenses include	_	No				⊔ Yes
		f people other t d your depende	han 👝	Yes				
Par	t 2: Estim	ate Your Ongoi	ng Monthl	y Expenses				
exp				uptcy filing date unless y y is filed. If this is a sup				apter 13 case to report of the form and fill in the
	•	•		government assistance	•			
	value of suc ficial Form 10		d have inc	luded it on Schedule I:	Your Income		Your expe	enses
4.		or home owners		ses for your residence. r lot.	Include first mortgag	e 4. \$		3,119.68
	If not include	ded in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
			•	ipkeep expenses		4c. \$		0.00
5.		owner's associat		dominium dues o ur residence, such as ho	ome equity loans	4d. \$ 5. \$		0.00
٠.			 			σ. ψ		0.00

Debtor 1	Jose A Galvao	Case num	ber (if known)	24-15533
6. Utili	ities:			
6a.	Electricity, heat, natural gas	6a.	\$	750.00
6b.	Water, sewer, garbage collection	6b.	·	
			· · — — — —	38.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	· : ———	420.00
6d.	Other. Specify:	6d.	·	0.00
	d and housekeeping supplies	7.	·	750.00
_	Idcare and children's education costs	8.	\$	0.00
. Clot	thing, laundry, and dry cleaning	9.	\$	100.00
0. Per s	sonal care products and services	10.	\$	120.00
1. Me c	lical and dental expenses	11.	\$	200.00
	nsportation. Include gas, maintenance, bus or train fare.	40	•	450.00
	not include car payments.	12.	·	
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	·	100.00
4. Cha	ritable contributions and religious donations	14.	\$	0.00
5. Ins ı				
	not include insurance deducted from your pay or included in lines 4 or 20.			
	. Life insurance	15a.		170.00
15b.	. Health insurance	15b.	\$	948.00
15c.	. Vehicle insurance	15c.	\$	313.00
15d.	. Other insurance. Specify:	15d.	\$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spe		16.	\$	0.00
7. Inst	allment or lease payments:			
17a.	. Car payments for Vehicle 1	17a.	\$	0.00
17b.	. Car payments for Vehicle 2	17b.	\$	1,120.00
17c.	. Other. Specify:	17c.	\$	0.00
	. Other. Specify:	17d.		0.00
	ir payments of alimony, maintenance, and support that you did not report as		<u> </u>	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	er payments you make to support others who do not live with you.		\$	0.00
Spe		19.	·	0.00
•	er real property expenses not included in lines 4 or 5 of this form or on Sche	dule I: Yo	our Income.	
	. Mortgages on other property	20a.		0.00
	. Real estate taxes	20b.	\$	0.00
	Property, homeowner's, or renter's insurance	20c.	\$	0.00
	. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	. Homeowner's association or condominium dues	20a. 20e.	·	0.00
			·	
1. Oth	er: Specify:	21.	+\$	0.00
2. Calo	culate your monthly expenses			
22a.	. Add lines 4 through 21.		\$	8,598.68
22b	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	· .
	Add line 22a and 22b. The result is your monthly expenses.		\$	8,598.68
220.	. That into 224 and 225. The result to your monthly expenses.			0,330.00
	culate your monthly net income.			
23a.	. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	9,532.16
23b.	. Copy your monthly expenses from line 22c above.	23b.	-\$	8,598.68
	•			
23c.	. Subtract your monthly expenses from your monthly income.			***
	The result is your monthly net income.	23c.	\$	933.48
	you expect an increase or decrease in your expenses within the year after yo			
	example, do you expect to finish paying for your car loan within the year or do you expect your ification to the terms of your mortgage?	mortgage	payment to incre	ease or decrease because of a
_	, 5 5			
■ N				
\Box	/oc Explain here:			

Case 24-15533-RG Doc 16 Filed 07/29/24 Entered 07/29/24 11:57:06 Desc Main Document Page 7 of 7

Fill in this info	ormation to identify your	case:		l
Debtor 1	Jose A Galvao			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	DISTRICT OF NEW JERS	EY	
Case number	24-15533			
(if known)				

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below	
Di	d you pay or agree to pay someone who is	NOT an attorney to help you fill out bankruptcy forms?
	No No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
ha 	at they are true and correct.	ead the summary and schedules filed with this declaration and
Х	/s/ Jose A Galvao Jose A Galvao	X Signature of Debtor 2
	Signature of Debtor 1	
	Date July 29, 2024	Date